

RCRA SUBPART H  
LIABILITY INSURANCE  
CHECKLIST

Owner/Operator Name EAGLE ~~TS~~-SIGNAL DIV.  
(Legal Representative) GULF + WESTERN INDUSTRIES

Facility I.D. No. 1AD051001337  
Name EAGLE SIGNAL DIV  
Address DAVENPORT

Insurance Agency/Broker AETNA LIFE & CASUALTY Co / MISSING FIRST STATE  
Address HARTFORD, CT INSURANCE

Amount and Type of Coverage \$1 M / OCCURRENCE - AGGREGATE 291M

Sudden (Required for all TSDs - \$1 mil occur/\$2 mil annual)

Effective Date: JANUARY 1, 1984

Expiration Date: JANUARY 1, 1985

N/A Non-Sudden (Required for Land Treatment, Surface Impoundment -  
\$3 mil occur/\$6 mil annual)

Effective Date:

Jan. 1983

Jan. 1984

Jan. 1985

Expiration Date: \_\_\_\_\_

N/A RCRA Endorsement

RCRA Certificate

missing for First State Insurance

Licensed as Excess or Surplus Lines Carrier

State NOTE - FIRST STATE ~~AND~~ INSURANCE NOT licensed in Iowa

Financial Test

Letter from Chief Financial Officer

Independent CPA's Report on Examination

Independent CPA's Special Report

Satisfied Financial Test Criteria

Review Comments

Instruments have identical wording to regulations

Submission adequate per regulations

✓ letter to company noting deficiencies

Letter to Facility to be incorporated with  
Closure Assurance Financial Documents

PMTS Review Complete: 3/9/84 - COOK

DATE: \_\_\_\_\_



R00307799  
RCRA RECORDS CENTER



RCRA SUBPART H  
FINANCIAL REQUIREMENTS  
CHECKLISTCLOSURE/POST CLOSURE ASSURANCE

☒ Owner/Operator Name  
(Legal Representative) Gulf + Western ~~Atlanta~~ Industries, Inc.

☒ Facility I.D. No. 1AD051001337

Facility Name EAGLE SIGNAL DIV.

Facility Address 736 FEDERAL ST DAVENPORT

Cost Estimate Amount \$ 4044 - REQUESTED COST OF CLOSURE PLAN + COST ESTIMATES

☒ Financial Instrument FINANCIAL TEST, CORPORATE GUARANTEE - CERTIFICATE  
INSURANCE

Financial Party \_\_\_\_\_

Signatures \_\_\_\_\_

Effective Date (date of CEO letter)

Expiration Date (end of fiscal year)

Notary/Seals (trust)

SPECIFIC AREASTrust Fund

Schedule A

Deposit Certification

Anniversary Date

Acknowledgement

Surety Bonds

Verification of Surety Company

Guarantee Bond

Performance Bond

Standby Trust Fund

Letters of Credit

Standby Trust Fund

Insurance

? ☒ Certificate Submitted WORD MISSING ALSO MISSING ONE CERTIFICATE OF INSURANCE

Financial Test - Required Items

- ☒ Letter from Chief Financial Officer \_\_\_\_\_
- ☒ Independent CPA's Report on Examination \_\_\_\_\_
- ☒ Independent CPA's Special Report \_\_\_\_\_
- ☒ Satisfied Financial Test Criteria 200T 3 for 265.143K(1)(1)(A)

Corporate Guarantee

- ☒ Financial Test Submissions \_\_\_\_\_
- ☒ Guarantee Form WORDING NOT EXACT REQUEST REVISION

Review Comments

- ☒ Instruments have identical wording to regulations CORPORATE GUARANTEE CERTIFICATE OF INSURANCE.
- ☐ Submission adequate per regulations \_\_\_\_\_

Letter to Facility

- ☐ Adequate Submission \_\_\_\_\_
- ☒ Deficiency/Request Additional Submission \_\_\_\_\_
- ☐ Comments \_\_\_\_\_

Supplemental/Revised Submission

- ☐ Received \_\_\_\_\_
- ☐ Adequate Per Regulations \_\_\_\_\_

File referred to AWCM for action:

PMTS Review Complete: 3/9/84 - Cook

Date: \_\_\_\_\_